FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

14328814

PROCESSED

FORM D

APR 2 2 2008
THOMSON
FINANCIAL

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY								
Prefix	Serial							
DATE RECEIVED								
1	İ							

					<u></u>	
Name of Offering (check if this	is an amendment and n	name has changed, and	indicate change.)		•	-
Private Placement of Limited Partnershi	p Interests of Source I	Rock Capital, L.P.			Adai, Si	<u> </u>
Filing Under (Check box(es) that apply)	: Rule 504 Ru	le 505 🗵 Rule 506	Section 4(6)	ULOE	Secti	Cessing
Type of Filing: New Filing	☐ Amendment				ADD .	- γ ₁
		A. BASIC IDENTIF	ICATION DATA	·	" K 15	////10
1. Enter the information requested about	t the issuer				-	*V V O
	is an amendment and n	name has changed, and	indicate change.)	1	Mestington	
Source Rock Capital, L.P. Address of Executive Offices	(N16 C'	- C 7:- C- 1-)		T-11	umber (Jig) p din) 0a
2716 Fairmount Street, Dallas, Te	•	ty, State, Zip Code)		i elepnone Ni	(214) 580-153	ig Area Code)
Address of Principal Business Operation (if different from Executive Offices)	is (No. and Street, Ci	ity, State, Zip Code)	Telephone l	Number (Including A	rea Code)	
Brief Description of Business						
Investment Partnership	· · · · · · · · · · · · · · · · · · ·					
Type of Business Organization						
corporation	\boxtimes	limited partner	ship, already formed			other (please specify):
business trust		limited partner	ship, to be formed			
Actual or Estimated Date of Incorpora	•		Month 0 I	Year 0 8	☑ Actual	☐ Estimated
Jurisdiction of Incorporation or Organ	•			: DE		
	CN for Cana	da; FN for other foreign	n jurisdiction)			
GENERAL INSTRUCTIONS						
Federal: Who Must File: All issuers making an offering of sec	urities in reliance on an exempt	ion under Regulation D or Sec	tion 4(6), 17 CFR 230.501 e	a seq. or 15 U.S.C. 77d(6).		
When To File: A notice must be filed no later than I received by the SEC at the address given below or, if						
Where To File: U.S. Securities and Exchange Commi	ssion, 450 Fifth Street, N.W., V	Vashington, D.C. 20549,				
Copies Required: Five (5) copies of this notice must signatures.	be filed with the SEC, one of w	hich must be manually signed	. Any copies not manually	signed must be photocopies	of the manually sign	ned copy or bear typed or printed
Information Required: A new filing must contain all changes from the information previously supplied in I				ring, any changes thereto, th	ne information reque	sted in Part C, and any material
Filing Fee: There is no federal filing fee,						
State: This notice shall be used to indicate reliance on the limust file a separate notice with the Securities Admini amount shall accompany this form. This notice shall	istrator in each state where sale	s are to be, or have been made	. If a state requires the pay The Appendix to the notice	ment of a fee as a preconditi	on to the claim for th	he exemption, a fee in the proper
Failure to file notice in the atthe appropriate federal no predicated on the filing of a	tice will not res					
Potential persons who are to respond to the collectio	n of information contained in	this form are not required to i	respond unless the form dis	plays a currently valid OMB	S control number.	SEC 1972 (2-97)



		A. BASIC IDENTII	FICATION DATA		
2. Enter the information re	equested for the fo	llowing:			
X Each promoter of the is	suer, if the issuer	has been organized within the	past five years;		
			ne vote or disposition of, 10% o	r more of a class of	of equity securities of the
issuer;		-	-		
			te general and managing partner	rs of partnership is	ssuers; and
X Each general and mana					
Check Box(es) that Apply:		Beneficial Owner	Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first,					
Natural Resources Capital					
		Street, City, State, Zip Code)			
2716 Fairmount Street, Da Check Box(es) that Apply:		Beneficial Owner	☐ Executive Officer	☐ Director	⊠General and/or
		Beneficial Owner	Executive Officer		Managing Partner
Full Name (Last name first, Sachs, William R., Sole Me	ember of General				
Business or Residence Addr 2716 Fairmount Street, Da		Street, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)			· •	
Business or Residence Addr	ess (Number and S	Street, City, State, Zip Code)			·
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)			. "	
Business or Residence Addr	ess (Number and S	Street, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and S	Street, City, State, Zip Code)			

						B. IN	FORM	1ATIO	N ABC	OUT O	FFERI	NG		
1.	. Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.										Yes □	No ⊠		
2.	2. What is the minimum investment that will be accepted from any individual?										\$ <u>250</u>	,000.00		
3.	Does the	offering	permit je	oint own	ership o	f a singl	e unit:						Yes ⊠	No
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. N/A														
Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)														
Busin	ness or R	esidence	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Coo	le)			•		
Nam	e of Asso	ciated B	roker or	Dealer										
State	s in Whi	ch Persor	Listed I	las Solic	cited or l	ntends t	o Solici	t Purcha	sers				_	
												······		All States
[AL [IL			[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	(DE) (MD)	[DC] [MA]	(FL) [M1]	[GA] [MN]	[HI] [MS]	[ID] [MO]		
[M]			[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[Ri			[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full	Name (L	ast name	first, if in	ıdividua	l)	-								
Busin	ness or R	esidence	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Coo	ie)					
Nam	e of Asso	ciated B	roker or l	Dealer								 		
		ch Persor												
(Che			check in [AR]	dividual [CA]	States).						[HI]	(ID)	Ц	All States
(IL			[KS]	[KY]	[LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[MS]	(ID) [MO]		
[M]				[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
(RI] [SC	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full	Name (L	ast name	first, if i	ndividua	1)									
Busin	ness or R	esidence	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Cox	le)					
Nam	e of Ass	ociated B	roker or l	Dealer	•	- · · · · · · · · · · · · · · · · · · ·								
		ch Persor states" or									••••			All States
[AI	.] [AK	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]		
[IL] [IN]		[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[M]			[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI] [SC	[SD]	[NT]	[TX]	(UT)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	(PR)		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Aggregate Amount Already Offering Price Sold Debt Equity ☐ Common ☐ Preferred Convertible Securities (including warrants)..... Partnership Interests..... \$ 2,855,000.00 2,855,000.00 Other (Specify _____)..... 0 Total \$_2,855,000.00 2,855,000.00 Answer also in Appendix, Column 3, if filing under ULOE Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero." Number Aggregate Investors Dollar Amount Of Purchases Accredited Investors 2,855,000.00 Non-accredited Investors 0 0 Total (for filings under Rule 504 only) N/A N/A Answer also in Appendix, Column 4, if filing under ULOE 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Type of **Dollar Amount** Security Sold Rule 505..... N/A N/A Regulation A..... N/A N/A Rule 504..... N/A N/A Total N/A N/A a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees..... Printing and Engraving Costs 0 Legal Fees..... \times 30,000.00 Accounting Fees 0

0

0

0

30,000.00

 $|\mathbf{x}|$

Engineering Fees

Sales Commissions (specify finder's fees separately)

Other Expenses (identify).....

Total

	b. Enter the difference between the aggregate and total expenses furnished in response to Par proceeds to the issuer."	rt C-Question 4.a. This difference i	Part C-Question 1 s the "adjusted gross	<u>Or Tr</u>	OCEED	\$ <u>2,825,000</u> .00
5.	Indicate below the amount of the adjusted gross each of the purposes shown. If the amount for check the box to the left of the estimate. The transceeds to the issuer set forth in response to F	any purpose is not known, furnish total of the payments listed must equ	an estimate and			
		·		O Dire	ments to fficers, ectors, & ffiliates	Payments To Others
	Salaries and fees			\$		\$
	Purchase of real estate			\$	o	\$
	Purchase, rental or leasing and installation	on of machinery and equipment		\$		\$
	Construction or leasing of plant building	gs and facilities		\$		\$
	Acquisition of other businesses (including may be used in exchange for the assets of			\$		\$
	Repayment of indebtedness			\$		\$
	Working capital			\$		\$
	Other (specify) (investments)			\$	<u></u> ⊠	\$ 2,825,000.00
	Column Totals			\$		\$ <u>2,825,000,00</u>
	Total Payments Listed (column totals ad	lded)			\$ <u>2,8</u>	25,000.00
		D. FEDERAL SIGNAT	URE			
igna	issuer has duly caused this notice to be signed by ature constitutes an undertaking by the issuer to mation furnished by the issuer to any non-accre-	furnish to the U.S. Securities and E	xchange Commission,			
Iss	uer (Print or Type)	gnature	Date			
So	urce Rock Capital, L.P.	MIN /~	April K) _{, 2008}		
Na	me of Signer (Print or Type)	itle of Signer (Print or Type)				
Wi		Sole Member of Natural Resources (L.P.	Capital, LLC, the gener	al partn	er of Sourc	e Rock Capital,
		ATTENTION				

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

		E. STATE SIGNA	TURE							
1.	Is any party described in 17 CFR 230.262 prule?	sions of such	Yes	No ⊠						
	See Appendi	ix, Column 5, for state response.								
2.	The undersigned issuer hereby undertakes to (17 CFR 239.500) at such times as required	o furnish to any state administrat I by state law.	or of any state in w	hich this notice is fi	led, a notice o	on Form D				
3.	 The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees. 									
4.	The undersigned issuer represents that the i Offering Exemption (ULOE) of the state in exemption has the burden of establishing the	which this notice is filed and und	derstands that the is							
	e issuer has read this notification and knows the dersigned duly authorized person.	the contents to be true and has du	ly caused this notic	ce to be signed on its	behalf by the	e				
Iss	uer (Print or Type)	Signature	Date	te						
So	urce Rock Capital, L.P.	Miller		April_ <i>D</i> , 2008						
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)								
Wi	William R. Sachs Sole Member of Natural Resources Capital, LLC, the general partner of Source Rock Capital, L.P.									

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

ı	<u> </u>	2	3		5					
	non-acc investor (Par	to sell to credited s in State rt B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount			
AL										
AK										
AZ										
AR										
CA										
СО										
СТ										
DE										
DC								ľ		
FL										
GA							_			
HI										
ID										
IL										
IN										
IA										
KS										
KY										
LA										
ME										
MD										
MA										
MI				•			· · ·			
MN					···					
MS				···						
мо					· - ·					

APPENDIX

1	2 3				5					
	non-acc investor (Pa	to sell to credited s in State rt B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount			
МТ										
NE										
NV										
NH										
NJ			·							
NM										
NY		No	Limited Partnership Interests \$250,000.00	1	\$250,000.00	0	\$0	No		
NC			-	<u> </u>						
ND										
ОН										
ок										
OR										
PA										
RI										
SC										
SD										
TN										
TX		No	Limited Partnership Interests \$2,605,000.00	9	\$2,605,000.00	0	\$0	No		
UT										
VT										
VA										
WA										
wv										

APPENDIX

1	2 3				4					
	non-ac investor (Pa	to sell to credited s in State rt B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount			
WI			,							
WY										
PR										

